## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION			
POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<del></del>		and the second
O.I.P.E. CLASSIFIER	11/		
FORMALITY REVIEW	2	000	11-27-00
RESPONSE FORMALITY REVIEW	<del>~                                    </del>	- 15.22.5	1-13-0

## INDEX OF CLAIMS

<del>-</del>	Rejected Allowed (Through numeral) Canceled Restricted	N	ce
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Best Available Copy

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Claim Date	Claim	Date	Claim Date
Final	Final		Claim Date
	51 52	++	101
3/-/	53	<del></del>	102
4 ×	54	╫╅┼┼┤	103
	55	╁┾╁┼┤	104
	56	<del> </del>	106
8 3 3	57		107
	58		108
10	59		109
11/1/1	61	<del></del>	110
12 / / /	62	<del>┞╌┨╌╏╌╏</del>	111
13 / / /	63	<del>╏╶╏┈╏┈╏┈╏</del>	112
14 / / / / / / / / / / / / / / / / / / /	64	<del></del>	113
16	65		115
	66		116
18	67		
19 / / /	69		118
20 -	70	<del></del>	119
21 3 4	71		120
22	72	╼┾╌┼╌┼╌┼	121
23 27 7	73	<del>╶┞╶╂</del> ╾╂╼┦	122
	74	<del>┤╸┼╸┤</del> ╶┼╴┤	124
26	75		125
27 3 1	76		126
28	77 78	+	127
29	79	+-+-+-	128
30	180	┾┼┷╁┤╎	129
31 32	81	┾┾┼┼┼┤	130
33	82	<del>┼╸┼</del> ╶┼╶┼╶┤	131
34 + + + + + + + + + + + + + + + + + + +	83	<del>┤</del> ╴┼╶┼╌┼╌┤	133
35 -	84		134
36	85		135
37	87	┼┼┼┼┼	136
38	88	<del>┞╌┼╶┩╶</del> ┦╴┞╴	137
39	89	<del>┞┈┼┈┤┈┤</del> ┈┤╴├╴	138
40 41	90	<del></del>	139
41 42	91	┝═╀═┼╌┼╌┤╴┠╌	141
	92	<del></del>	142
<del>┞┈┪╻╣╾┾╼╄╼╄╶╂</del> <del>╶╂</del> <del>╌┩</del> ╾ <del>┩</del> ╾ <del>┩</del>	93		143
	94		144
46	95 96	<del>                                      </del>	145
_  4/	96	++++  [	146
[48]	98	╼┾╼┼╾┤	147
	9	<del>╶┼┼┼</del> ┼┤ ├╴	148
1901	od	<del>╶┼╶┼╌┼╌</del> ┤╴├ <del>╸</del>	149

If more than 150 claims or 10 actions staple additional sheet here